

2-Way Memo

Subject : MEDICAL RECORDS REVIEW

To : Dr. L. Kreisler, Medical Director
 REECO, NTS
 ATTN: Stan Anson

INSTRUCTIONS

Use routing symbols whenever possible.

SENDER:

Use brief, informal language.

Conserve space.

Forward original and one copy.

RECEIVER:

Reply below the message, keep one copy, return one copy.

DATE OF MESSAGE

Routing Symbol

June 22, 1977

SAFDH:RMJ

SIGNATURE OF ORIGINATOR

Rudolph M. Jezik

TITLE OF ORIGINATOR

Chief, Occupational Health Branch

INITIAL MESSAGE

The persons shown below are scheduled for duty tours on Enewetak. We would appreciate a review of each persons medical records to insure

- (a) each employee has had a physical examination in the last year,
- (b) no employee is in need of extensive medical treatment or dental care,
- (c) the last physical examination included base line blood counts including white cell with differential and hemoglobin and was recorded,
- (d) no employee has received extensive diagnostic or thereapeutic radiation exposure, and
- (e) each employee has the physical capability to perform his assignment and is free of any restricting influence.

REPLY MESSAGE

We would appreciate the above review as soon as possible. Please call me if you run into any difficulty.

R. Ray*

B. Church*

P. Dunaway

F. Markwell*

P. Fitzsimmons

E. Campbell

P. Mudra

J. Stewart*

J. Moroney

E. Boland

L. O'Neil

* These people are currently in the field.

From : Rudolph M. Jezik, Chief
 Occupational Health Branch
 Safety Division

DATE OF REPLY

Routing Symbol

SIGNATURE OF REPLIER

TITLE OF REPLIER

3. TO BE RETAINED BY ORIGINATOR

OPTIONAL FORM 27

JULY 1973

GSA FPMR (41 CFR) 101-11.6